PATENT APPLICATION	RD		רבסס	45		5 6			
CLAIMS A	SMAL	SMALL ENTITY OTHER THAN							
TOTAL CLAIMS			1	RAT	E	FEE		RATE	FEE
FOR .	NUMBER FILED	MUMB	NUMBER EXTRA		FEE	370.00	OR	Dasic Fee	740.00
TOTAL CHARGEABLE CLAIMS	2) minus 20=			X3) =		OR	X\$18=	18
INDEPENDENT CLAIMS	e Eaunim	nes3 = * * * * * * * * * * * * * * * * * *		X42	X42-		OR	X84=	672
MULTIPLE DEPENDENT CLAIM PRESENT				+14	D-		OR	+280=	
* If the difference in column 1 is less than zero, enter *V* in column 2								20041	
CHAINC AC AMENDED BART II							OR	OTHER	7774
CLAIMS AS AMENDED - PART II (Column 1) (Column 3)					ш	ENTITY	OR	SMALL	
CLAIMS REMARKING AFTER AMERICANIST Total Independent L	MUA PREVI	HEST ABER IOUSLY FOR	PRESENT EXTRA	. RAT	E	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
Total • 317	Minus - G	N	•	X\$ 8)		OR	X\$18=	800
Independent • Ly	Minus •••	<u> </u>	*	X42	W.		OR	X84=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM . 🔻								+280=	64 ()
				+144	JA TAL		OR	TOTAL	360
7/20/05 (Column 1) (Column 2) (Column 3)							OR	ADDIT. FEE	11.60
CLAMS	HIG	mn 2) Est	(Column 3)	_	-	ADDI-	1		ADDI-
REMARKING AFTER AMENDMENT Total • 7 0	PREV	KBER IOUSLY FOR	PRESENT EXTRA	RAT	E	TIONAL		RATE	TIONAL
Total • 79	Minus	<u>37 </u>	-42	XS)=		OR	X\$18=	2100
Independent • FIRST PRESENTATION OF M	Minus	T CT ATM	1- ()	X42	.		OR	X084=	0
THE THE LEGISTRA OF THE				+140			OR	+280=	
ulal.				ADOIT.	ILL FEE		OR	TOTAL ADDIT. FEE	310.0
(Column 1)		mn 2)	(Column 3)						
CLAIMS REMAINING AFTER AMEROMENT	PREV	REST RBER ROUSLY POR	. PRESENT EXTRA	RAT	E	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
Total • D Independent • D	Minus - 8	D 79	- O	XSS			OR	X\$18=	
Independent •	Minus see	7	· >>	X42	<u> </u>			X84a	7
FIRST PRESENTATION OF M	ULTIPLE DEPENDEN	T CLAIM	9				OR		((-)' -
* If the come is estimate to be found than the	he entre la coloma 2	مد نط خارج ها	Armo S	+140	•		OR	+2B0=	
"If the entry in column 1 is less than the entry in column 2, write "O" in column 3. "If the entry in column 1 is less than the entry in column 2, write "O" in the Tighest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." The Tighest Number Previously Paid For" IN THIS SPACE is less than 2, enter "3." The Tighest Number Previously Paid For" (Intal or independent) is the highest number found in the appropriate box in column 1.									

FORM PTO-678 (Rox 8/01)

Petent and Tradoman Office, U.S. GENANTINENT OF COMMERCE

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PATENT APPLICATION FEE DETERMINATION RECORD Effective December 8, 2004

10/077137

CLAIMS AS FILED - PART I												
		(Column		(Colu	ımn 2)		SMALLE Type (INTITY	OR	-	R THAN ENTITY	
T	OTAL CLAIMS							RATE	FEE	7	RATE	FEE
FOR		NUMBER FILED NUMB		BER EXTRA	R EXTRA BASIC FEE		E	OR	BASIC FEE			
TOTAL CHARGEABLE CLAIMS			minus 20= * /			/		X\$ 25=	1	OR	X\$50=	1
INDEPENDENT CLAIMS			minus 3 = * \				X100=	11,	OR	X200=	1	
MULTIPLE DEPENDENT CLAIM PRESENT						+180=	11/	1	+360=	\ /		
* If the difference in column 1 is less than zero, enter "0" in column 2							TOTAL	11/	OR OR	TOTAL	V	
COLLINS AS AMENDED - PART II						OTHER THAN						
	11910	Column 1)	1	· (Colum		(Column 3)	Г	SMALL		OR	SMALL	
AMENDMENT		REMAINING AFTER AMENDMENT		NUMBI PREVIOU PAID FO	ER JSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NOW N	Total	. 59	Minus	#7°	7	=		X\$ 25=		OR	X\$50=	
AME	Independent	NTATION OF MI	Minus	***	7	- 1		X100=	1	OR	X800=	
<u> </u>	FINST PRESE	INTATION OF MI	DLIPLE DEI	PENDENT	·			+180=		OR	+360=	
		•				••	L	TOTAL			TOTAL ADDIT, FEE	
		(Column 1)		(Columi	n 2)	(Column 3)	_	ODIT. FEE	<u></u>	•	BODII. FEE	
_		CLAIMS REMAINING		HIGHE	ST		Г	·	ADDI-	1 1		ADDI-
ENT		AFTER AMENDMENT		NUMBE PREVIOL PAID FO	JSLY	PRESENT EXTRA		RATE	TIONAL FEE		RATE	TIONAL FEE
AMENDMENT	Total	*	Minus	-50	2	=		X\$ 25=		OR	X\$50=	
AME	Independent	* NTATION OF MU	Minus	ENDENT C	7	=		X100=	,	OR	X200=	•
	7 11.01 1 11.00	117,170,170,171	ETH EE DEF	·	ZCANVI			+180=		OR	+360=	
						A	TOTAL DDIT. FEE		OR	TOTAL ADDIT. FEE		
		(Column 1)		(Column		(Column 3)						
AMENDMENT •	·	CLAIMS REMAINING AFTER AMENDMENT		HIGHES NUMBE PREVIOU PAID FO	R	PRESENT EXTRA		RATE	ADDI- TIONAL- FEE		RATE	ADDI- TIONAL FEE
NON N	Total	•	Minus	**				X\$ 25=		OR	X\$50=	
AME	Independent	*	Minus	***		2		X100=			.X200=	
	FIRST PRESE	NTATION OF ML	LTIPLE DEP	ENDENT C	LAIM		-			OR		
• 1	• If the entry in column 1 is less than the entry in column 2, write "0" in column 3.							+180=		OR	+360=	
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ADDIT. FEE ADDIT. FEE ADDIT. FEE									: :			
The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												